**Public Servant Safety Entry Report**

**Post / Auxiliary #**

**Law Enforcement/ 9-11 Operator**

Amount spent on awards:

Post $ Auxiliary $

Additional monies spent on the program:

Post $ Auxiliary $

Number of entries in this program:

**Fire Fighter**

Amount spent on awards:

Post $ Auxiliary $

Additional monies spent on the program:

Post $ Auxiliary $

Number of entries in this program:

**Emergency Medical Technician**

Amount spent on awards:

Post $ Auxiliary $

Additional monies spent on the program:

Post $ Auxiliary $

Number of entries in this program:

Post Chairman’s Name (print)

Copy to: District Chairman with entry